The MEDICAL MISSIONARY

Bali Dancing Girls

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The Motherhouse and the Novitiate are located in Brookland, Washington, D. C.

At present the Society labors in India where the Sisters conduct hospitals, dispensaries, maternity and child-welfare centers, training schools for native nurses and midwives, and similar health activities. It is the purpose of the Society to send Medical Missionaries to any mission field of the world as soon as its numbers permit.

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Let Us Go to Mary

In the middle of the month of August, when nature reaches its peak of development and exuberance, Our Holy Mother the Church celebrates the Feast of the Assumption of Our Lady into heaven, the glorious end of Her joyful and sorrowful life in this world. No creature can have felt deeper joy than She, for none was more blessed; none can have felt deeper sorrow, for none had a larger share in Her Divine Son's redemption of the world.

With the Assumption into heaven, Our Lady's sorrows were over, but Her joys were to have no end and were to radiate forever over the whole human family. *"Cause of Our Joy"* the Church hails her so appealingly and so gratefully. We Catholics love Her, we cling to Her, invoke Her under many titles and beg Her Sweet Heart to be our salvation. Convinced of Her powerful intercession, our Holy Father, although weighed down with years and cares, gave yet another proof of His solicitude for those sitting in the shadow of darkness by asking the legion of thirty millions of members of the Apostleship of Prayer to implore the Giver of all gifts that devotion to Our Heavenly Mother and pilgrimages to Her shrines may be promoted in mission lands.

There is something in pilgrimages which satisfies human nature. The escape from the humdrum of everyday life for a few hours or days, the change of environment, the pleasant company of friends, and the silent communing with one's inner self which in the hustle and bustle of work so seldom is accomplished, the buoyancy which springs from the hope of obtaining a request—all these lighten the heart of the devout pilgrim. At the shrine he sees others absorbed in prayer or in attitudes of pleading; he joins processions, sings hymns, hears sermons, goes to the Sacraments, sees crutches and votive tablets telling of miraculous cures. All these combined help him to come nearer to God, to honor, love and serve Him better in the future. Even if he does not obtain the cure or the request for which he came, he leaves refreshed and strengthened.

That there is something universally appealing in pilgrimages is shown by the fact that practically all religions and sects have their share. Protestants are an exception in this; their psychology does not seem able to give the heart its full due. Confucianists, Buddhists, Mohammedans, Hindus, and adherents of other Eastern religions have countless shrines around which interesting legends and beliefs are woven. It is the height of ambition of every Mohammedan to go to Mecca once during his lifetime. The Hindus will sacrifice anything for the privilege of going to *Holy Khasi* (Benares) to worship there in the Golden Temple and bathe in the Ganges. From time immemorial it has been known that mass pilgrimages in India leave cholera and other epidemics in their wake, but neither governments nor any public health bodies would or could stop them. Only a few days ago we read of Rameshwaram, a little picturesque island in the Bay of Bengal, where throngs of pilgrims attended the annual festivals, during which worship was conducted six times a day, beginning at 4.30 a. m. with a milk bath for the goddess and ending at night with a procession in which she was carried about in a bed. Not far from this Hindu shrine is a mosque with two tombs, where Cain and Abel are supposed to be buried. Large numbers of Moslems visit them in consequence of vows of various kinds.

We merely mention these to show that pilgrimages are nothing new to Orientals; on the contrary, it seems that the Indians surpass even the Europeans in their love of them. Many non-Christians join the Catholics in Goa in their veneration of St. Francis Xavier when his body is exposed. There are some Catholic pilgrimages in the East, for instance, that of Zose near Shanghai; of Shing-mo-shan, also in China; of Madu, the Singhalese Lourdes, in Ceylon; and a few in India, Japan, and Africa.

During the month of August many prayers ascended heavenwards that devotion to the Mother of Mankind and pilgrimages to Her shrines may be promoted. As our magazine does not appear during the summer months, we had no opportunity to bring this intention, so dear to us, to the notice of our readers. We are therefore urging them now to continue to pray that devotion to Our Lady and pilgrimages to Her shrines may be promoted in the missions, so that She may manifest Her compassion and draw millions to truth and happiness.

High Spots on a Mission Cruise

By

ANNA DENGEL, S.C.M.M., M.D.

Bali

We reached Bali early on March 23, seventy hours after leaving Java. It was a beautiful morning. The sea was as smooth as oil, the sky slightly cloudy, and in the distance the green fields and terraced hills of the island looked most inviting. The motor boats of the *S.S. Reliance* took us ashore, where cars awaited us. Our driver was a native boy, about eighteen. He manipulated the Ford splendidly.

Our first visit was to the bat temple in Koesambe. It was a characteristic Balinese shrine with an ornate, archlike structure at the entrance and several buildings within. In the background was a dark, natural cave, the walls and roof of which were literally hung with black bats, which are considered sacred. A few fluttered about. Prayers and offerings take place there. In the big courtyard of the temple venders had spread their wares, such as carved figures of gods or animals, pointed hats with designs painted on them, fans, bamboo dolls, silverware, carved cocoanut shells, brass bells, masques and crowns worn by dancing girls.

The drive through the countryside was very pleasant. There were rice fields to the right and to the left in all stages of growth. The climate is so favorable and the land so fertile that it yields two crops of rice a year with one of peanuts and maize in between. Rice and pork are the staple foods of the people. We noticed little shrines in the fields here and there, and found out afterwards that they were dedicated to "*Dewi Sir,*" the guardian goddess of rice. Boys were busy chasing the birds from the ripe grains. An interesting feature of Balinese economics is that labor in the rice fields is a kind of communal affair. Balinese men, who like to indulge in music, dancing and cockfighting, believe that men should do only work which women cannot do. The heavy cultivation of rice and irrigation they count among the latter.

The people we met on the roads looked healthy and happy. To anybody who knew India, the Indian strain in them was quickly apparent. The men wear very little; the women also are lightly clad. The lower castes wear only a skirt, while the higher castes add a jacket. Some of the women carrying baskets of rice or fruit had a cloth fixed to the sides of their basket; it hung down gracefully in curtain fashion, sagging in the middle and thus leaving the face uncovered.

At the village of Kloenkoeng we saw the peculiarly carved and painted open hall of justice, where the Balinese chieftains still hold court. While they retain certain rights and privileges, the real government of the island is in the hands of a Dutch resident, two assistants, seven Dutch controllers, and a handful of police. The roads we drove over were very good. We were told that those who cannot pay taxes in cash can do so by road labor, which many prefer. The roads also have their shrines with images of Gana, the god who is supposed to remove obstacles.

The villages in Bali are unique: they are laid out rectangularly, intersected by roads and closed in by high mud walls to keep out the evil spirits. At short intervals there are little gates so constructed that only one person can go through at a time. Each gate has also a low bamboo barrier over which one has to step. All these contrivances are meant to keep out the evil spirits. Outside these gates, as a further protection, are bamboo poles surmounted by triangular or semicircular birdhouse-like structures with

There are many new temples in Bali.

little platforms in front. Food and flowers for the gods are placed on them.

We went into an enclosure and were received very nicely. The main hut had mats on the floor and a few pots here and there. A man, a woman and a few children emerged from a smaller one. In the back was the family shrine, which contained several pillars surmounted by smaller shrines. I could not see any idols in them. The people seemed to be very religious. They are Hindus of a kind, largely influenced by a pre-Hindu civilization. Their socio-religious life is so intricate that only an expert who has spent a lifetime in the study of it can give an interpretation of the many ceremonies and customs. Every village has its temple with its characteristic grotesquely ornamented entrance gate, which also allows only one person at a time to enter. There are many new temples because the Balinese stone crumbles very quickly and the people believe that it is a sign that the gods want new temples when the old ones begin to show signs of deterioration.

The Balinese have their Mecca, too. It is the famous temple of Besakit. Among the more elaborate ceremonies are the cremations, for which they erect enormous structures and celebrate expensively. Their New Year's Day, which fell a few weeks before our arrival, is preceded by a day of silence and cessation of all traffic. It is the vigil when heaven is swept of evil spirits. The day itself is celebrated with cockfights.

In one of the villages we witnessed an elaborate religious ceremony. The priest sat in a bamboo shelter raised high on poles. He was picturesquely dressed. Opposite him sat a very elegant looking gentleman; below were refined ladies, praying devoutly. At one side a ceremonial water was being poured from bamboo bottles.

Close by this pageantry was a large covered hall which was filled with men watching cockfights. They were so intent that they did not pay the least attention to us. There was not a single native woman among the spectators. We could see the whole thing very clearly. One cock was white, the other dark brown. Both had sharp, narrow blades about ten centimeters long tied to one leg. The respective owners carried them to the center of the arena and patted and caressed them before letting them loose. The two combatants at first stared at each other sharply. Then began the fight, which soon ended with the defeat of the dark cock. The stab of the knife kills at once. What makes the fight interesting is the gambling, of course. The government put a stop to these cockfights except for special occasions and feasts. Apparently the day of our visit was such an occasion, for we passed many big gatherings under trees and in halls.

Somewhere we stopped at a market place, where vegetables, fruits, Japanese glassware and other things were for sale. The selling was in

A *lelong* dancer in Bali.

the hands of women. Several passengers tried to take photos of them, but they moved away in protest. On the whole, however, they did not seem shy, and we were told that they have considerable freedom. Marriage of free choice, which is rather unusual in the Orient, is quite common although not universal. Bali still has its spectacular "bride captures." When the girl wears a flower behind her right ear, the suitor knows that she will accept him—although she refuses outwardly, expressing her protests by kicking and biting her captors. When the father of the bride hears of the "kidnapping" he is supposed to run to the tower and beat the drum, asking who took his daughter, but of course, no one knows. The searching party, too, returns breathless and empty-handed. The official public marriage ceremony is supposed to take place forty-two days after the "kidnapping." If not enough money is available, it is postponed until later. Three wives are allowed. Divorce is not practiced. The average dowry to be paid to the father for a wife is fifty guilders.

We drove through village after village, via Sidon and Bangli, to the Kintamani Rest House, five thousand feet above sea level. From there we saw Batoer crater and the lake, and had an

(*Continued on page* 145)

The Red Cross In India

Where some might falter and hesitate because of the wide field which India presents to an organization interested in humanitarianism, not so the Indian Red Cross Society. In fact, the great need of the work but spurs the society forward.

Every type of work in which the Red Cross is interested finds a fertile field for cultivation. First aid and sanitation, nutrition, tuberculosis control, health improvement, prevention of disease, mitigation of suffering and aid to the sick, are but some phases of the permanent program which the Indian Red Cross Society has established for itself. Besides the permanent program, the organization is ready for emergency work at all times.

The national campaign against tuberculosis is the most recent undertaking in which the Indian Red Cross is cooperating. Launched by the Marchioness of Linlithgow toward the end of last year, the Society immediately donated a substantial amount to the campaign and proceeded to mobilize the active interest of the entire Red Cross organization in India. Sir Ernest Burdon, chairman of the managing body, made personal appeals to all provincial, district and state branches, pointing out that the magnitude of the task was one worthy of every effort of the Indian Red Cross.

The nutrition campaign, from which much is eventually expected, is being pursued along several different lines. One avenue of approach to better food is through the Junior Red Cross, which recently has issued a "Guide to a Well-Balanced Diet." This is divided into three sections, one explaining what food contains, one giving selections of diets, and the third pointing out what Junior Red Cross groups can do to improve nutrition in India.

Another avenue of approach is through school gardening projects, especially in rural areas. A number of schools have undertaken this method with excellent results. Education in the value of milk as a necessity is also included in the program. This instruction is to be provided for both parents and children.

Fostering first aid is another activity of the Indian Red Cross. Each year All-India Ambulance Competitions are staged and prizes awarded. Competitions for 1938 were held at New Delhi last February 2-4, and a record number of competitors were attracted. Awards of prizes were made by the Viceroy, the Marquis of Linlithgow, which considerably enhanced interest in the contests throughout all Red Cross circles.

Recently the Indian Red Cross undertook to establish a Red Cross Trained Nurses' Emergency Roll, all of whom hold themselves in readiness for call in emergency or in case of war. It was not long after undertaking this step that a call came in. When a number of persons were killed and a greater number injured in a train crash near Patna, a request was received for ten nurses to assist in caring for the injured that had been admitted to the Patna General Hospital. These nurses were mobilized without loss of time and sent to Patna, thus demonstrating the value of the emergency roll.

Red Cross societies throughout the world cooperate in the task of aiding suffering humanity. Their work is constantly going forward. To make this work most effective, Red Cross organizations needs must have the united support of the people they represent. This support is best expressed in membership in the Red Cross. Dues from this source finance all activities. The annual Roll Call of the American Red Cross, when members for the coming year will be enrolled, begins Armistice Day and ends at Thanksgiving.

"Our home policy is Catholic Action, and our Foreign policy is Missionary Action."—**Cardinal Hinsley.**

Prickly Heat

By

Anna Dengel, S.C.M.M., M.D.

Snakes live in jungles or in jungly places, and rarely does one hear of a white man being bitten. The Bengal tiger does occasionally venture into a village and kill or maul whoever opposes his plans, but it is a startling enough event to find its way into the papers. The major scourges, such as plague, cholera, elephantiasis, and leprosy, are rarely contracted by white people because they know the laws of hygiene and sanitation, and usually have the means to carry them into effect. There is, however, a minor plague which neither rat-proofing nor mosquito netting can avert. It is not caused by parasites or insects, but simply by tropical climatic conditions. This little plague is nothing more nor less than prickly heat. Those who have been victims of it say that they would prefer an attack of fever.

Medical Missionaries seeking a cooling breeze on the Ganges.

Medically, prickly heat is termed "miliaria," which tells the story of its possible distribution. As soon as the real hot weather begins, when the thermometer rises to 105° F. and beyond, when man and beast feel limp, and when with the expenditure of energy—and often even without it—perspiration laden with irritating products of body waste pours forth profusely and rapidly, the tiny sweat glands are overworked and sometimes become blocked. When that occurs, an acute inflammation sets in. The parts of the body where sweat glands abound are then literally sprinkled with a rash of minute, red, water-filled vesicles. The irritation is so great that rest is out of the question. Needless to say, to prevent infection, scratching is to be avoided as much as possible.

It can be easily imagined that the sufferer seeks relief. Prickly heat being very common in the tropics, many remedies have been recommended. A completely satisfactory one has not yet been found. The swabbing of the skin with calamine lotion or 1/1,000 mercuric chloride (corrosive sublimate, which is a poison) or very dilute hydrochloric acid are found useful by many. For those who have a tender skin or for infants and children, the application of milk of magnesia can be recommended.

Powders containing sodium bicarbonate and menthol or talc with zinc oxide, salicylic and boric acid and similar combinations also give relief, but powders have the disadvantage of clogging up the pores. A tepid bath made alkaline with sodium bicarbonate or a little scrub ammonia tends to open them and also to allay the itching. In very severe cases, a lotion containing prussic acid may produce the desired sedative effect. Prussic acid, being very poisonous even in great dilution, can be obtained only with a doctor's prescription.

"Prevention is better than cure" applies to prickly heat as to everything else. The most obvious precaution to take is to wear light, loose-fitting, porous, absorbent clothes and to use cane chairs and string beds which allow for circulation of air. Everyone knows from experience that the more one drinks, the more one perspires. Therefore, a logical preventative would be to take the minimum of liquids. This, however, is not advisable as toxins would accumulate in the body if they were not flushed out. However, excessive intake of liquids would only aggravate the condition unnecessarily.

Last but not least, perhaps, in the line of alleviation may be mentioned *patience,* which is tested to the utmost by this "hair shirt" of the tropics, the penance of which is all the worse for being inflicted and not chosen. Unfortunately it is the newcomer to the missions and babies who are especially afflicted by this condition, not necessarily grave from the medical standpoint, but always very trying and annoying; harassed as he already is in his efforts to acclimatize himself to the different mode of life in regard to food, temperature, clothing, language, he finds prickly heat by no means the least part of his already heavy burden. There is a bright side to prickly heat, too, namely, the thought that it does not last forever. As soon as cool breezes waft the palm tops, it disappears without leaving a trace behind.

Under the Silver Crescent

By

SISTER M. LAETITIA, S.C.M.M., R.N.

A continuation of Sister Laetitia's overland trip from India to London.

Syria

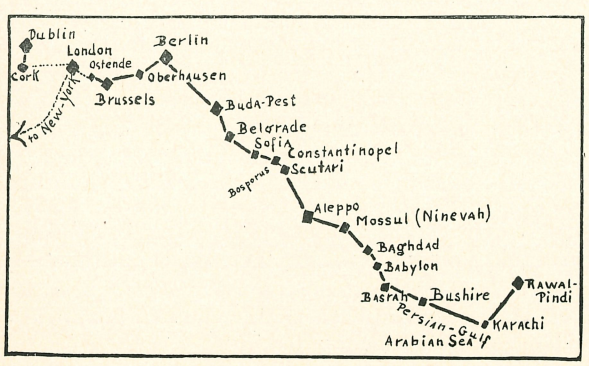
We arrived at the railway station in Syria about five or six o'clock in the evening. I got into a little wooden compartment which held about twelve people, so arranged that six would ride back to the engine—those immediately opposite, facing it.

At first there were few passengers from that out-of-the-way corner of the world but the compartment soon filled up as we penetrated deeper into Syria. My fellow passengers were Syrians, Turks and Arabs and, as none of us could speak the others' language, we somehow managed to carry on a conversation by means of gestures.

One Turkish woman who had two little children was very beautiful. She told us that she or her husband or *somebody* was a doctor. I was not sure who. Presently a man appeared, patted himself on the chest and announced, "Doctor," thus solving the mystery. We then all held a very amusing conversation in a mixture of Arabic, Syriac, Turkish, French and English.

Presently the Syriac lady developed a headache. I happened to have some aspirin tablets and gave her two, thus cementing another friendship. Then her daughter got a piece of coal in her eye, which, by unanimous consent, I was delegated to remove, but the light was too poor and the train so wobbly that it was an impossibility. Surprisingly, our Turkish friend produced a bottle of argyrol, a medicine dropper and some cotton, so first aid was rendered in real style!

In spite of having a doctor in the family, the daughter of the once great Ottoman Empire gave the baby a meal every time he opened his mouth, which he did with great frequency. Presently she decided that his eyes were a little sooty so she carefully washed them out with milk.



Aleppo, Syria's Capital

In the morning we reached Aleppo, the capital of Syria, a white little town, built on a plateau about 1,400 feet high. The old part of the city is surrounded by a wall that dates from Saracen times. The walled section contains the Zakaria Mosque within which is the tomb of Zacharias, father of Saint John the Baptist. The city looked clean and inviting with its well-built streets and lovely gardens. The whole place was full of trees and shrubs which contrasted beautifully with the white buildings.

In many countries of the world the government officials, at least, know some English, but in Syria it is French that is used as the alternative. Along with the language the people have adopted some of the French customs, including their careful check-up on foreigners. If I was awakened from my slumbers once during the night I was awakened a dozen times for "le Passeport."

After leaving Aleppo we headed directly for Turkey, rather wondering if, as the Armenian nurse predicted, we should be in for a gentle little massacre.

Turkey

At last—the Turkish frontier! As Bagdad had been better supplied with stamps than India, there was no difficulty in getting into the country, and a beautiful one it proved to be, too. After poor, sun-baked India and Iraq, it seemed like entering paradise. High mountains, so high that their peaks were still laden with snow even in midsummer, fertile valleys, rivers and streams in abundance—such was Turkey!

The Turks appeared to be good, hard-working people. Their land was well cared for and properly cultivated, even to the extent of machinery. In old Anatolia we passed through Angora (or Ankara as it is now called), the capital of Turkey since the seat of government was transferred from Istanbul to this city a few years ago. Not a single goat was to be seen anywhere about "Angora," in spite of its name, though one almost expected to see them butting and baa-ing their long-haired way through the crowd gathered at the large, lively railway station. Since the women have unveiled and the fez has been abolished, the people looked as ordinary as any collected at a European or American station, except that the older women had not taken

kindly to wearing anything as foreign as a hat, so most had compromised on a tri-cornered black silk handkerchief, worn on the head and tied under the chin.

Many of the passport officers wore steel helmets and were very stern and official. They not only gruffly demanded one's passport, but they took it and kept it until one was leaving Turkey, and one's dollars and cents had also to be produced and counted, as practically no money may be taken out of the country.

Outside of the cities one still sees the big, baggy trousers, *kummerbund* and *fez* of the older Turks, but in the towns the men wear European suits and caps. Millions of caps are to be seen, and the thought continually recurs: Cap-makers and merchants must flourish here! Even the *mullah,* when he climbs up the minaret for the muezzin's call, looks like a gangster of the East Side of New York in his dilapidated suit and cap.

Religion of any kind is barely tolerated in Turkey—a reaction to the tyranny of the sultans. No religious habits are permitted, not even the Mohammedan *fez,* and Islamism itself seems to be on the wane in spite of the beautiful mosques and graceful minarets that pierce the sky in every direction.

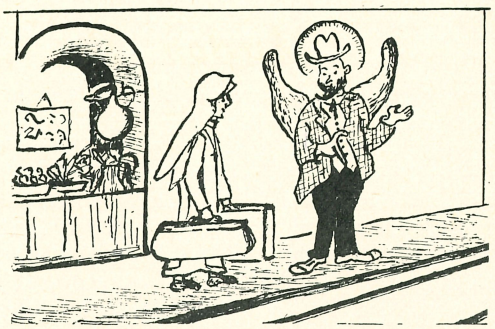
First Cousin to a Massacre

As I was walking out of the station at Hyder Pasha, some Turks informed me politely but firmly that my religious costume would land me in jail if not immediately removed. It sounded first cousin to a massacre, but there was no means of stepping out of my habit in the midst of one of the busiest capitals of the world. Even when I arrived at the sanctuary of the French hospital, run by the Coronet Sisters, there was little I could remove except rosary and crucifix. This fooled nobody except myself, and every few minutes on the street I would be greeted with: *"Hamshira"* (sister). But I reasoned that since the habit was perfectly simple and sometimes eccentric ladies wear veils, I would pass as a harmless individual. This proved to be the case, and if I ran into any of those charged with the duty of showing me the inside of a Turkish jail (which would have been an interesting experience), they conveniently gazed in the other direction.

Turkish Guardian Angels

The Turkish people were among the nicest and kindest that I have ever met—mild, friendly, and obliging. The little leopards seemed to have entirely changed their spots—until the next massacre!

No matter whether I traveled by train, tram, ferryboat, or on foot, I always met with the greatest courtesy. Not being able to speak Turkish, I could only utter the name of my destination and perhaps point (!) to the tram lines,



A Turkish Guardian Angel

and if it were the wrong one, my informant would shake his head, indicate another track, and await the coming of the next car to be sure it was the right one.

The first time this happened, my guide asked me to open my purse, which I did a little reluctantly, thinking he was demanding the eternal *bakhshish* of the East, but no! He merely took some copper coins and conveyed the ideas that so much and no more was to be given to the conductor. He apparently knew his conductors!

Your little Turkish guardian angel never leaves you until your tram comes along and you are safely tucked in and started! When the tram arrived, he told the conductor my destination, and the latter attended to the rest, while the whole car-full of people saw to it that I was not led astray. If any difficulties arise along the way, the fellow passengers jump up and gather around and offer all the languages of Europe at the same moment: *"Ma soeur, parlez-vous francais?" "Schwester, sprechen Sie Deutsch?"* "You spik Inglis?"

Constantinople

Crossing the Bosphorus from Asia to Europe at sunset presents one of the most beautiful scenes in the world. The sun-flecked clouds, the blue of the sky, the graceful minarets and domes of the mosques, the little boats plying back and forth, the lights beginning to twinkle from the shores, the gently rolling hills—all mirrored in the Bosphorus below, produced a picture of incomparable charm and magnificence. Today no one could even remotely imagine the

mountains of severed heads, the rivers of blood that have run into these innocent-looking waters. Its situation at the crossroads of Europe has been responsible for coloring it with the blood of every nation in the world.

Constantinople, or Istanbul, since it changed its name, is situated partly in Asia and partly in Europe. The Bosphorus divides the Asiatic city of Scutari from the European side. This latter is again divided into Pera-Galata and the old Byzantine city of Stambul, by the Golden Horn.

Galata is built upon a hill that forms a promontory between the Golden Horn and the Bosphorus on the site of the great cemetery of ancient Byzantium. The famous Galata bridge crossing the Golden Horn to Stambul has been likened to the Grand Central of Istanbul. There is a tradition that a member of every nationality in the world crosses it once an hour.

On both sides of the bridge are docks for small steamers taking commuters between the Golden Horn and Scutari, the 15 stations of the Bosphorus, and the Prince's Islands. Many of these commuters are prosperous Turks who have summer homes for their families on Prince's Islands, an hour away.

Fire! Fire!

The renowned old tower of Galata is a landmark of the city. In the World War its top was blown off, and it has continued to crumble. It was used as a look-out for fires in a city whose houses are largely built of wood.

Until very recently the fire department consisted of unpaid volunteers. At the first cry of "Fire!" they would run with their equipment to the scene of the blaze and then bargain with the householder before proceeding to extinguish it. If he would not satisfy their demands, the house would continue to burn—and the bargainers to bargain! The firemen reasoned that even if they were to charge half the value of the property saved, the owner would still be to the good. If he wanted to stand and haggle while more and more of his house burned, that was his own stupidity. Even if they had to go away and leave the fire still burning, they would not be the losers anyway, for the conflagration would probably spread to the next house, whose owner would in all likelihood prove more amenable.

Atta Turk!

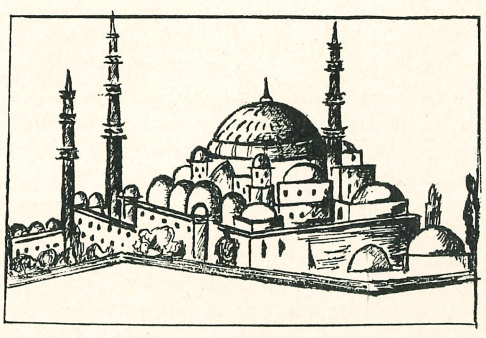
Pera is the really European part of Istanbul. It is high and airy, many of the streets are wide, the stores, hotels, and embassies differing very little from those of any other European city except in this—the head of everything in Turkey must be a Turk, whether it be a mission, a hospital, a business house, a school—even Thomas Cook and Son must have a Turk at the head. This has been accomplished by Gaza Mustafa Kemal Pasha, the President of Turkey, who is generally called *Attaturk* (Father of the Turks). He has done a great deal for Turkey since the gaily colored tyrannical misrule of the sultans ended a few years ago. Under his presidency morals have improved and his subjects tend to marry but one wife. The thousand wives of the sultan's harem have disappeared, and the Turk seems to have found out that the peace and joy of a quiet home is not multiplied a thousand times by the acquisition of that many occupants of his hearth. Instance the rich Turk who had but two wives, and had to build each a separate house, one enormous building the exact replica of the other in every detail, in order to preserve peace. No wonder heads went flying from the windows of the sultan's Old Seraglio into the Bosphorus, and sometimes quarrelsome beauties, tied in sacks, were sent hurtling through the air into the water below.

The Dwelling of the Gods

Stambul, ancient Byzantium, is the thoroughly Turkish part of Constantinople. Its crooked, narrow old cobbled streets, its overhanging verandas and many grated windows, relics of the jealously guarded harem, its mosques and minarets, its thousands of pigeons that will almost perch on one's shoulders, seem to have stepped out of an era far removed from up-to-date Pera. Many of the houses are of unpainted wood. The Christians were not permitted to paint their houses, and under the Moslem law, to be rich is not always a blessing; the lack of paint was perhaps supposed to prove that even those living in luxury were in reality poverty-stricken.

Byzantium was called the "dwelling of the gods" on account of the numerous temples and shrines that were converted into churches by the Emperor Constantine—and into mosques by the Turks!—the most beautiful of these being the historical Sancta Sophia, the largest temple in the world next to St. Peter's. It was built by Justinian in six years from money collected from Africa, Europe, and Asia, at his plea for a shrine which would really honor God.

The dome is still the largest and most perfect in the world. There are many legends about



Mosques and Minarets

this magnificent shrine. It is said that an angel helped Justinian, and when he was in doubt, he would think and pray about a particular section, and in a dream would see how it should be done. When the workmen were tired and weary, celestial music was said to cheer them into greater efforts.

The Donkey-Boy Angel

In spite of the great amount of money that came pouring in from rich and poor, it seemed to evaporate with great rapidity. When the coffers were empty, an angel would turn donkey-boy, descend into some unknown secret vaults, and return laden with gold and silver. Its cost is estimated at about $64,000,000.

This glorious structure was finished in 537 A.D., a whole generation before the birth of Mohammet, and for centuries was the greatest Catholic cathedral in the world. The hundred-and-seven marble pillars gracing the interior were brought from every historical part of the globe. Two were the gift of the magistrates of Ephesus and came from the temple of Diana. Eight of porphyry belonged to the temple of the sun, built by Aurelian at Balbek. Others came from the temple of Jove at Cizicum, from the temple of Helios at Palmyra, from the temples of Tibes, Athens, Rome, Alexandria, etc. They are all colors and all sizes. Among the columns, balustrades, and slabs may be seen marbles from all the shrines of the Archipelago from Asia Minor, Africa, and Gaul.

Allah Is the Light of Heaven and Earth

This immense edifice was completed in half a dozen years by 10,000 workmen—a miracle of speed. Around the great dome runs a gallery above which are 40 arched windows. At the top is written in letters nine yards long: "Allah is the light of heaven and earth"—the sentence uttered by Mohammet II as he sat on his horse on the great high altar at the taking of Constantinople.

In 1453 as the Janissaries came pouring into the city, the terrified Christians fled to Sancta Sophia for safety and clung in desperate hope to the legend that when a victorious enemy reached the column of Constantine, an angel would place a flaming sword in the hand of a little child to drive back the conquerors. In a moment the hordes were at the door (where the marks of their impatient hands are still to be seen). For an instant they paused at the sight of the rich magnificence of the interior. Then, with a loud cry of triumph, they advance to begin their task of despoiling Sancta Sophia.

No blood was shed, and the half-dead captives, high-born lady and lowly slave, ascetic monk and gay-clad courtesan, half-grown maiden and middle-aged matron, were chained together in couples and driven forth to be sold as slaves.

(To be continued)

September Mission Intention

"That Orphan Asylums in the Missions May Be Increased in Number"

Perhaps never in the history of the Church in mission lands was the need greater for Catholic orphanages than at the present time. There has always existed in China, for instance, the horror of infanticide caused more by dire necessity than by parental indifference or hatred. Today, owing to the Sino-Japanese conflict, parents, otherwise willing and able to care for their children, find themselves homeless and starving. To them the orphanage is truly an asylum to which they can confide their offspring knowing that every care will be given them.

India, harassed by its 1938 onslaught of cholera, has cast thousands of parentless children upon the mercy of the world. To whom can these unfortunate little ones turn unless to the Catholic Church, whose orphanage walls will be stretched to the limit to admit them?

In northern Africa, particularly among Moslems, the care of the orphans is the only work of evangelization permitted. Deep in the Congo the victims of malaria and sleeping sickness leave destitute children whose only hope is to reach the Catholic orphanage. Even the languorous islands of Oceania, famed for their natural beauty, are breeders of malignant ills which, carrying off parents, leave the little ones to be cared for by the mission asylums.

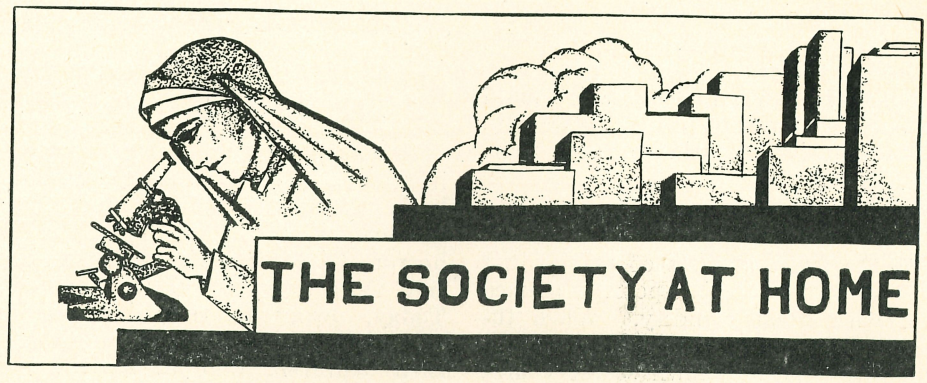
The present conflict in China shows how timely is the Holy Father's intention for this month. At Hankow, the Canossian Sisters are busy caring for war orphans. Mme. Chiang Kai-Shek is at the head of the committee caring for these suffering waifs. Already 20,000 children have passed through the Sisters' hands. Most of these children are being sent to orphanages in the interior—away from the scenes of battle.

Thus, by our prayers for the increase of Catholic orphanages in mission countries, many new souls may be taught to know, love, and serve the kind Redeemer Who wished above all things to be enshrined in the hearts of children.

AN S.O.S.

The Sister in charge of the operating room at Holy Family Hospital is in need of—

3—50cc Luer syringes—about	$25.00
3 dozen curved Kelly artery forceps	50.00
Miscellaneous special instruments	25.00
Total	$100.00



Our Thirteenth Anniversary

September the thirtieth, the anniversary of the day on which the Little Flower, Patroness of The Missions, took her flight to heaven, and at that time her first feast day after her canonization, was the day chosen for the official foundation of THE SOCIETY OF CATHOLIC MEDICAL MISSIONARIES. This event took place in a small frame house in Brookland, D. C., in 1925.

We are still too young to indulge in reminiscing, but we will sketch very briefly the development of our work from that day until this. Where we then had four members, we now have 44 professed Sisters, 12 novices, and 15 postulants.

Our first mission was in Rawalpindi, in the north of India, in the old St. Catherine's Hospital. The Society now has a hospital of its own, Holy Family Hospital, which has replaced the earlier one. In the same city it also conducts St. Francis Dispensary in the native section and a Maternity and Child-welfare Center. In Dacca, Bengal, India, the Medical Missionaries have charge of the nursing in the 450-bed municipal hospital and also direct the training school for nurses and midwives in the same institution. The Sisters also conduct two Maternity and Child-welfare Centers and a third private health center for the outcastes in the same city, and act as Health Visitors for the municipality. In England we have a Medical Mission House which serves as a postulate for the European candidates. As all our friends and benefactors well know, we have long outgrown the first, second, and third Medical Mission House in this country, and are now begging far and wide for funds to buy or build a real substantial Motherhouse.

Sister M. Pauline, S.C.M.M., R.N.

Sister M. Pauline's Departure

Although October is the usual month for the departure of Medical Missionaries for India, one of the number of this year's band has already completed the first lap of her journey. On July 26, Sister M. Pauline, R.N., formerly Miss Anna Mae Downing, of Manchester, Conn., sailed for the Medical Mission House in Osterley, England, where she will remain until joined by the rest of the group going to India this fall. Sister M. Pauline is a graduate of St. Francis Hospital School of Nursing Education in Hartford, Conn.

The departure ceremony was held on the evening of July 25. The Reverend Maurice Kanzleiter, C.P., gave a short talk in which he stressed the divine origin of the missionary life in the command of Christ: "Go ye into the whole world and preach the gospel to every creature." Sister M. Pauline renewed her Mission Oath, and the ceremony ended with Benediction of the Most Blessed Sacrament followed by the *Te Deum*. Sister left early the next morning amid the tinkling, clanging, and gonging of every bell available—a Medical Mission House tradition—making a glorious discord which wove itself into a single song: "*Bon Voyage!* God be with you!"

Profession and Reception

On the feast of the Assumption of Our Lady, climaxing a lovely eight-day retreat conducted by Rev. John J. Heenan, S.J., of Sacred Heart College, Woodstock, Md., eight novices made their first profession and three postulants received the habit and the white veil of novices. Continuing the kindness of other years, The Reverend Francis P. Goodall, C.S.C., Superior of the Holy Cross Foreign Missionary Seminary, again permitted us to use the Bengalese Chapel for the ceremony.

The following received the habit and white veil: Miss Maria van der Eerden, of Oisterwyk, Holland, in religion Sister M. Lucia; Miss Lillian Ciociola, of Brooklyn, N. Y., in religion Sister M. Philomena; and Miss Lucille M. Grasmann, of Jamaica, L. I., N. Y., in religion Sister M. Gabriel.

Those who made their first Vows and Mission Oath were Sister John Mary McGinley, R.N.; Sister M. Joan Mulder; Sister M. Rose Callahan; Sister M. Veronica McCarthy; Sister Madeleine Sophie Du Vally; Sister M. Virginia McCarty, R.N.; Sister M. Jude Caine, R.N.; and Sister M. Winifred O'Connell.

Sister John Mary, R.N., is a native of Ballindrait, County Donegal, Ireland, and is a graduate of the University of Pennsylvania Hospital School of Nursing in Philadelphia.

Sister M. Joan is a native of Bathmen bij Deventer, Holland, and finished her pre-medical studies at the University of Amsterdam. She made her postulate at the Medical Mission House in Osterley, England.

Sister M. Rose is a native of Annapolis, Md., where she also received her high school education, entering the Society shortly afterwards.

Sister M. Veronica is a native of Kircubbin, County Down, Ireland, where she also received her education. She made her postulate at the Medical Mission House in Osterley, England.

Sister Madeleine Sophie is a native of Providence, R. I., and at the time of her entrance into the Society was a member of the staff at the Sacred Heart Academy, Elmhurst, Providence, R. I.

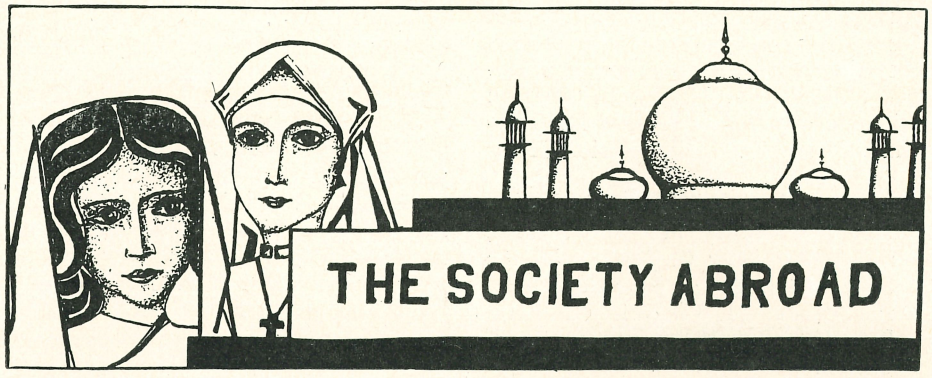
Sister M. Virginia, R.N., is a native of Zanesville, Ohio, and is a graduate of the Good Samaritan Hospital in the same city.

Sister M. Jude, R.N., is a native of Madison, Wis., and is a graduate of St. Mary's Hospital in that city.

Sister M. Winifred is a native of New York City and is a graduate of Aquinas Hall High School.

The Most Reverend Timothy J. Crowley, C.S.C., Ph.D., Bishop of Dacca, Bengal, India, who is in the United States for a six months' visit, presided at the ceremony and was the celebrant of the Mass which followed. By a happy coincidence, as he mentioned in his sermon, it was the anniversary of his own departure for India. Thirty-four years ago, on August 15, he took his Mission Vow and left for far-off Bengal, where he has labored ever since. He was consecrated coadjutor Bishop of Dacca in 1927 and made Bishop in 1929.

From left to right: Standing—Sr. Madeleine Sophie, Sr. M. Virginia, Sr. M. Joan, Sr. M. Jude, Sr. M. Winifred. Seated—Sr. M. Veronica, Sr. M. Rose, Sr. John Mary.



England

Address: Medical Mission House
98 Thornbury Road
Osterley, Middlesex, England

With the arrival of Sister M. Pauline at our English house, the population jumped to five professed Sisters and ten postulants. However, with Sister M. Elizabeth, the Superior, leaving any day for the Motherhouse to take part in the General Chapter, the number of professed Sisters will go back to normal. Sister M. Elizabeth writes: "Since the last postulants arrived, we are beginning to visualize the crowded conditions in Washington, although we haven't reached your degree of congestion as yet."

Otherwise the Osterley house goes its quiet English way. Afternoon tea for the Catholic Nurses' Guild the last week of May, the Annual Garden Party in June, one or two mission exhibits during the summer, the drifting in of new candidates, the arrival of Sister M. Pauline, and the departure of Sister M. Elizabeth for Washington. As in America, the postulants are probably beginning to spend less time in the garden and increasingly more time in the classroom.

Rawalpindi

Address: Holy Family Hospital
Murree Road
Rawalpindi, Punjab, India

Jottings from Our Sisters

"Quite busy in the dispensary. One woman handed her bottle over to be filled. I found a tiny hole in the bottom, so proposed to her that we give her another one—but no, she explained, 'Keep your finger over the hole while you fill the bottle, then cork it, invert it, and I shall take it home thus until I need to use it.' Ingenuity!

"One of the patients today brought up the usual question, 'Are you married?—Why not?' To my surprise, a Mohammedan woman next her heard and offered an explanation. 'Don't you know the Sisters do not marry because they are the brides of God!' That was the first time I ever heard an Indian express such a thought.

"Today, when I tried to take a woman's temperature, she said, 'The pain is not in my mouth but in my bones. Why take the temperature that way?' "—Sister M. Ann.

* * * * *

"Monotony? It can't happen here. Life in a mission hospital is a pandemonium one day and a day of retirement the next. This is especially the case if a patient dies. The calm occurs after the hysterical women folk, with many screeching lamentations and beating of themselves and tearing of hair, leave the hospital, not only with the corpse, but with several other in-patients, who by a process of reasoning agree that if others have died in the hospital, the same might happen to them, etc., etc. . . . There are 16 cases of cholera in Rawalpindi. We have all been inoculated. The immunity should last about three months. . . . Sister Stephanie was called on a case last night: twin girls were born. Some of the fathers do not welcome one daughter; I wonder what this man said when presented with two!"—Helen Lalinsky, S.C.M.M., M.D.

(Since the above was written the cholera epidemic has increased to unusual proportions throughout India. In the Central Provinces alone 80,000 deaths have been reported.)

* * * * *

"As I write this letter I have to lift my hand up every once in a while to keep it from sticking. They say it really isn't hot yet, so I don't know what I'll do when the summer comes. And just yesterday I received a letter from my sister telling about a snowstorm they had in April. Right now I feel as though I wouldn't mind shoveling some snow."—Sister M. Camillus.

(Sister has had a vacation in the mountains since this was written.)

Dacca

Address: Sister M. Helen, S.C.M.M.
Mitford Hospital
Dacca, Bengal, India

Dacca Maternity and Child-Welfare Report

There are two Maternity and Child-welfare Centers in Dacca, each one in charge of a Medical Missionary Sister with trained native midwives under her supervision. As the patients are cared for in their native huts, usually under very adverse conditions, it is a wonder that the results are as satisfactory as the records show. The patients are not obliged to come to the Centers for prenatal care, nor do most of them have the Health Visitor or one of the trained native midwives care for them in their homes. The number who do come, however, is increasing, and the difference in the death rate between the cases supervised by the Health Visitors and those cared for by the untrained native midwives is quite marked. The following extracts are taken from last year's official report of the Health Department which has just reached us:

"Of the 5,759 births registered in the city, the Center staffs attended 1,686 cases during confinement or immediately after confinement, representing 29.2 percent of all registered births.

MORTALITY RATES

	Center cases (per 1,000)	Non-center cases (per 1,000)
Maternal mortality ...	6.5	13.2
Infant mortality	33.8	75.6

"The work of 26 indigenous midwives was supervised during the year, 2,559 babies were kept under observation, 2,140 expectant mothers were supervised by the Health Visitors and the Medical Officer. Two milk kitchens were again maintained for the supply of milk free of charge to destitute mothers and babies."

The report closed with a tribute to those in charge.

"The Centers sustained a serious loss during the year in the death of Health Visitor Sister Frances. Her selfless devotion to duty prompted her to exertions which undermined her health and brought about her premature death. The memory of her work will, we feel sure, act as a source of inspiration to her successors, and be cherished with gratitude by the numberless patients who benefited by her attentions.

"Health Visitor Sister Joseph, who succeeded Sister Frances; Health Visitor Sister Thomas; and Dr. Ganguli worked very hard for the successful working of the Centers."—J. D. TYSON, President.

Milk and Clothes

The Health Visitors are always short of two items for their destitute charges—milk and clothes. During the hot season, clothes are not needed and are very little worn, but during the short cold spell, especially at night, the babies and tiny children suffer bitterly from the cold, which probably accounts for many deaths. Sister Joseph just wrote: "May I beg for a few warm frocks for the poor little babies, for the winter in these little bamboo huts (some are made of kerosene tins instead) is very cold and the poor little ones have nothing to cover themselves with."

Milk is very cheap in India, so any sum our readers will send us will go a long way; and cotton cloth is also very cheap. In fact it is much cheaper to buy it there than to pay the charges for sending articles from America.

Mitford Hospital

"Eight of our nurses went to Calcutta for their examinations last month, and all passed."

—Sister M. Helen.

Sr. M. Magdalene, R.N., of Holy Family Hospital, holding a Christian, a Mohammedan and a Hindu baby.

Medical Mission Notes

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Africa

Nuns from Killeshandra, Ireland, who are going to Nigeria as missionaries are among the 200 planters, miners, engineers, and other missionaries who are taking the free malaria course for laymen at the University of London's Ross Institute of Tropical Hygiene.—THE UNIVERSE, July, 1938.

India

At a recent ceremony His Excellency, the Governor of Burma, presented the Mother Superior of the Rangoon Leper Asylum with the Kaiser I-Hind Gold Medal. The Governor commented on the friendly and happy atmosphere which is a striking feature of the Asylum and praised the devoted care with which the Sisters were relieving the sufferings of those afflicted. —THE HERALD, April, 1938.

* * *

India, with its population of 370 millions, has only 40 clinics where tubercular patients can be treated, and most of them are poorly equipped. It is estimated that five millions of the population are suffering from this disease, and there are only 2,703 hospital beds in the whole country set aside for tubercular patients. —*India's Anti-Tuberculosis Campaign* in THE SOCIAL ORDER, May, 1938.

* * *

"We were again impressed by the fact that in the control of tuberculosis, as in any disease in India, we must leave the hospital laboratory and help the Indian to eradicate the evils of his social and economic set-up. Just as it is important for the physician to be instrumental in cleaning up the slums of the large western cities, it is equally important for the doctor in India to assist in cleaning up the filth of disease and ignorance in the Indian village."—*Tuberculosis Among the Women and Children of Balrampur, India,* in THE MEDICAL WOMAN'S JOURNAL, July, 1938.

* * *

The Fathers of the Society of the Divine Word are completing a large new hospital at Khurda, India, the Government donating almost half the money for the building. The mortality rate there is alarmingly high among the women and children. To quote: "So we tried to grapple with this problem first. Some Franciscan Nuns here took a course in Midwifery in Indore. On their return we obliged all our Christian women to come for delivery to our hospital. They did not like it at first as this did away with some of their time-honored customs, but we simply forced them. It did not take very long, however, before they began to realize the great advantage of the new arrangement."—*Five Years in India* in THE CHRISTIAN FAMILY, July, 1938.

China

The Irish Hospital Sweepstakes' directors sent £5,000 to the International Red Cross Committee in Hankow, and that committee, realizing the terrible need in Hanyang and the fittingness of aiding Irish priests and Sisters with Irish funds, gave the St. Columban Mission the lion's share of the money to be used for the wounded of Hanyang. They at once planned to turn the St. Columban catechumate into a 150-bed hospital and help in the proper equipment of the military hospitals of Pai Ya T'ai and Ying Wu Chow. . . . In the former military hospital beds and clothing for almost 2,000 wounded had to be made.—*Hospitals in Hanyang* in THE FAR EAST, May, 1938.

* * *

"This missionary body in China, which has resolved itself into an army of charity in the present conflict, is composed of 5,000 priests, of whom 2,000 are Chinese; 1,500 lay-brothers; 6,000 Sisters, more than half of whom are Chinese; over 15,000 teachers and catechists; and 7,000 students from Major and Minor Seminaries."—*The Army of Charity in China* in THE ROCK, May, 1938.

* * *

The Rev. Dr. V. Szuniewicz, who seven years ago opened a model medical mission center at Shuntehfu, Hopeh, has recently been changed to Central Hospital, Peking. His work in the Shuntehfu district has been acclaimed as one of the most effective campaigns against eye diseases ever conducted in China. So eager were many sufferers from eye diseases to be treated by this noted priest and skilled physician that within a few hours of his arrival in Peking he was at work in the clinic with a long queue of patients awaiting their turns.—FIDES.

Fiji Islands

Bauli-Bamana, tribal chief in the Islands, had suffered for six years from a terrible skin disease which almost resulted in the loss of an arm. The ministrations of Sister Sabine of the Missionary Sisters of the Society of Mary, who has served in the Fiji Islands for twenty-five years, effected a remarkable cure. As evidence of devotion and gratitude the chief and his tribesmen helped to build a modern church.—THE HERALD, April, 1938.

HIGH SPOTS ON A MISSION CRUISE

(*Continued from page* 133)

extensive view over the country. The whole island is only ninety-five miles long and fifty miles wide, but harbors a million people. It is more densely populated even than Java, which has 330 inhabitants to the square mile, while Bali has 450.

From Kintamani we motored via Gianjar, the seat of the native regent, to Den Pasar, where we thoroughly enjoyed a rest at the Bali hotel. The greatest treat of the day awaited us after lunch under a huge spreading banyan tree. A full *gamelon gong* or native orchestra was assembled to accompany the dancers. The whole performance was worth seeing and hearing. It is impossible to describe the music in words; it is the most vivid expression of emotion and mood that I have ever heard.

The first act was a *kebiar* by a little lad who swayed his limbs and his body and vibrated his muscles in unison with the moods of the orchestra. His face and eyes also spoke with the music. No story is attached to the dance; the art consists in the dancer's ability to construe the many moods. A second little performer almost surpassed the first. His manipulations of a fan were nothing short of magic. Then there appeared the *lelong* dancers—solemn-faced girls in native metal brocade costumes tightly fitted to their lithe bodies, and crowned with an aureole of precious-looking headgears. A servant presented each with a fan and then the drama began. One could not but marvel at the extraordinarily graceful movements and the masterly expression of emotions. No westerners could equal them.

One of the famous Balinese dances which, however, we had no occasion to see, is the *kechack*, danced in times of sickness. Originally its purpose was to drive away evil spirits. It is danced in temples by the men. The postures vary from sitting, lying flat on the back, to touching head to feet, and are accompanied by music in keeping with the feelings of the dancers—or probably vice versa. A few years ago, when an epidemic swept the south of the island, *kechacks* were danced regularly every night for a long time.

Bali was the first and only country on our whole cruise where we did not meet a single sign of Christianity. As a matter of fact, missionaries had not been allowed to work there. Recently, however, this has been changed. Christianization will be difficult and slow, but the human soul, even naturally tending to Christianity (*anima naturaliter christiana*), the Balinese will, with Divine grace and the example and teaching of the missionaries, gradually be delivered from their fear of evil spirits and learn of the God of Love.

In Our Library

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THE GARDEN OF GOD. *By Robert Eaton, Cong. Orat. Burns Oates & Washbourne Ltd. London,* 1938. 91 *pp.* 2*s* 6*d.*

There is a vast difference between the preparation of the word we expect to be heard and the word we expect to be read. The sermon must be graphic and simple, for the ear must not only catch syllables, but transfer them into pictures; it is assisted in this task by the other senses, particularly the eye. But the text that is to be read requires only the secondary assistance of the senses; it appeals directly to the mind, it uses words in their deepest meaning, it presents ideas, presents them once, and leaves the reader to reflect on them and re-read them if he will.

Much of the charm of *The Garden of God* will be lost if we do not consider this point at the outset, for the volume, as the foreword tells us, is a collection of discourses given at the clothing and profession ceremonies of nuns in various convents. We will get the greatest pleasure out of this little volume, then, not by settling down like theological students in the quiet of our minds to delve profoundly into matters religious, but rather by seating ourselves in an audience gathered for the purpose mentioned, by imagining before us women who are about to pledge themselves to Christ's work and around us their relatives and friends, by transferring the words we read into words we hear with all the inflections and gestures which the priest who conceived them would add.

There are fourteen discourses in all, each based on a biblical text. The language is simple and easy. The quotations from the Old and New Testaments are abundant, and woven into the thread of thought easily and aptly.

SNARES, DEADFALLS, AND OTHER TRAPS OF THE NORTHERN ALGONQUIANS AND NORTHERN ATHAPASKANS. *By Dr. John M. Cooper. Catholic University Anthropological Series, No.* 5. 1938. 144 *pp. with* 6 *plates.* $2.00.

This will prove an interesting treatise for those who study methods of capturing game—methods which are still in use, among our Indian tribes. The paper deals exclusively with traps and trap-like devices used for birds and land animals. It does not touch on hunting customs in general, as the author intends to devote a paper exclusively to this subject at a later date.

Besides the six plates, there are 88 illustrations of the construction and mechanism of the snares and traps discussed. All of these have been made by the author from actual pictures or sketches gathered during his expeditions among the tribes named.

Dom Francis Augustine Walsh, O.S.B.

Dom Francis Augustine Walsh, O.S.B., has received long, fine, and well-deserved eulogies in the Catholic papers. His confreres will remember him as a gentle and genial priest; his students as a deep philosopher; veteran soldiers as their devoted padre; the readers of his books as a learned author. We will always remember him as a friend of our pioneer days from whom flowed the milk of human kindness.

Picture a Medical Missionary chopping wood on Christmas Eve suddenly confronted with the learned Father Walsh holding a fruit cake in his hands. The Brother Cook had baked it, and Father brought it personally quite a distance because he thought that we poor beginners might not have a cake for Christmas. That cake will never be forgotten!

On another day in the very beginning of the Society, our retreat master, Rev. Father Hill, S.J., fell suddenly ill after the first conference. It had been such a beautiful one and put us so much in the spirit of the retreat, that we decided to continue the retreat by hook or by crook. We tried everywhere to get a retreat master. Father Walsh again came to our rescue. He was so busy that he could not give all the conferences himself, but that did not deter him. He prevailed on the Prior and Father Moore and other priests to fill the gaps. It was a unique and beautiful retreat.

Even as late as this spring, Father Walsh gave us a conference on the Confraternity of Christian Doctrine. His example of kindness and gentleness will ever remain with us. *May he rest in peace!*

Rt. Rev. Msgr. Basil Gudgeon

Our Osterley house lost a staunch friend in Monsignor Gudgeon, the English National Director of the Propagation of the Faith. Although only 49 years old, he leaves behind him a full and distinguished career as army chaplain, professor and national director of the three Pontifical Mission Aid Societies and of the Catholic Women's Missionary League. His outstanding aim and achievement was that of making missionary cooperation a part of ordinary Catholic life. Several successful exhibitions held in different cities made it clear that this was an apostolate of prayer and almsgiving from which no one was exempt. Although Monsignor Gudgeon bestowed many kindnesses on us, the outstanding one was precisely in the line of missionary exhibits for which he chose our Society to exemplify the Medical Apostolate. *May he rest in peace!*

Dr. L. F. Flick

We mention the death of Dr. L. F. Flick especially because we want to recommend to the prayers of our readers one who was among the earliest sympathizers and friends of our Society and also because he was one of those men whose life is a real inspiration.

Dr. Flick, upon whom the University of Notre Dame conferred the Laetare Medal, and the Catholic University of America, Villanova College, and other institutions conferred honorary degrees, was born at Carrolltown, Pa., and studied at St. Vincent's College. Discovering that he had tuberculosis, he gave up the study of law and entered Jefferson Medical College with a view to healing himself and then resuming his law course. He was graduated from medical school in 1879, interned at the Philadelphia General Hospital, and then began his law studies. His health broke again, and he went to California, where he obtained work packing oranges. He returned to Philadelphia little more than a year later completely cured.

Dr. Frick was largely responsible for the establishment of the Benjamin Rush Hospital and the White Haven Sanatorium, of which he was president from 1901 to 1935.

The medical world owes much to Dr. Frick, and the Medical Missionaries will miss an old friend. *May he rest in peace!*

R. I. P.

Please pray for the repose of the souls of—

Rt. Rev. Msgr. Basil Gudeon, Winchester, England
Rev. Francis Augustine Walsh, O.S.B., Washington, D. C.
Rev. Wm. F. Toohig, Dorchester, Mass.
Rev. T. C. Klimke, Pittsburgh, Pa.
Rev. J. Walter Lambert, Somerville, Mass.
Rev. John Russell, D.D., New Haven, Conn.
Sister Mary Adele White, Hartford, Conn.
Sister Mary Aquinas Blake, Hartford, Conn.
Sister M. Rose Bernard, C.S.C., Dacca, Bengal, India
Mother Susan Mary Collingridge, Washington, D. C.
Mrs. Catherine Connors, Washington, D. C.
Mrs. C. Food, Oldham, Lancs, England
Mrs. Rose C. Klorer, Canton, Ohio
Mrs. Wm. Grobschmidt, S. Milwaukee, Wis.
Mrs. Margaret R. Keough, New Britain, Conn.
Miss Mary Graham, Wilmington, Del.
Miss Mary Tally, Providence, R. I.
Dr. L. F. Flick, Philadelphia, Pa.
Mr. Th. Wijnen, Holland (Father of Elizabeth Wijnen, S.C.M.M., M.D.).
Mr. John Barrett, Hartford, Conn.
Mr. John Joseph McCarty, Zanesville, Ohio
Mr. James D. Healy, Willimantic, Conn.
Mr. John Lavin, New London, Conn.

Eternal rest give unto them, O Lord.
And let perpetual light shine upon them.
May they rest in peace. Amen.

St. Joseph's Page

Departure for the Missions

Early in October all the bells at the Medical Mission House will ring, when a band of Medical Missionaries will depart for India. They are eagerly awaited there because the field is literally white with the harvest but the laborers are few. We are busy packing, as we always aim to take as much as possible with us to save freight and custom duty.

St. Joseph, pray for us.

Superiors have the task to provide the wherewith for the journey. It's a long, long way to India, more than 10,000 miles to our missions, and every mile costs 3 cents. One passage, therefore, costs $300; this multiplied by 5 makes ——! I prefer not to put it in actual figures; it might give me a nightmare!

Dear Reader, may I ask you to speed our departing missionaries on the way to their work of mercy by sponsoring a few miles of their journey. He who helps a missionary receives the reward of a missionary.—ANNA DENGEL.

Dear Doctor Dengel:

Please find enclosed $..... to pay for ..... miles of passage for a Medical Missionary going to India.

Name .....

Address .....

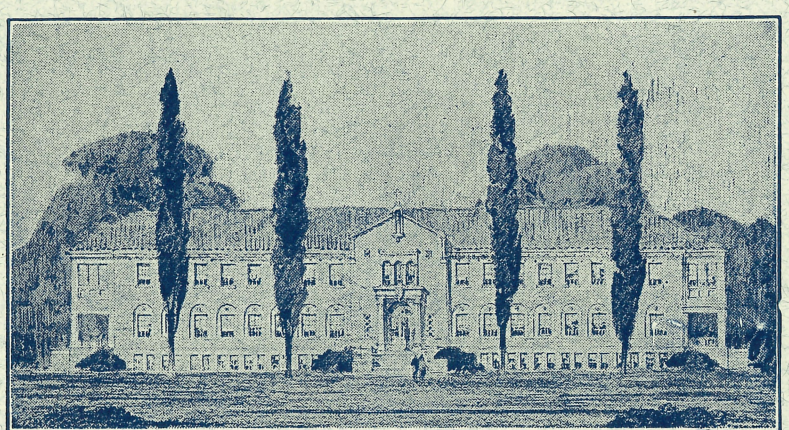
.....

Vouchsafe, O Lord, for Thy Name's sake, to reward with eternal life all those who do us good.

RANSDELL INC., PRINTERS-PUBLISHERS, WASHINGTON, D. C.

Our Motherhouse

What We Have!

and

What We Need!